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AUG 21 2023

U.S. DISTRICT COURT

Name: Constantino Cuara R-
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UNITED STATES DISTRICT COURT FOR THE DISTRICT OF UTAH
DIVISION

Constantino Cuara R.
(Full Name)

PLAINTIFF

vs.

Tooele Army Depot
American Correctional
Association
National Rehabilitation
Association
Utah state office
Rehabilitation Administration

DEFENDANTS

A.A. General Service
Office / Alcoholics
ABA American Bar Association

CIVIL RIGHTS COMPLAINT
(42 U.S.C §1983, §1985)

Case: 2:23-cv-00545
Assigned To : Romero, Cecilia M.
Assign. Date : 8/21/2023
Description: Cuara v Tooele Army
Depot

1. Jurisdiction is proper in this court according to:

- a. ☒ 42 U.S.C. §1983
b. ☒ 42 U.S.C. §1985
c. ☐ Other (Please Specify) _____

2. NAME OF PLAINTIFF Constantino Cuara R-
IS A CITIZEN OF THE STATE OF USA SLC UT

PRESENT MAILING ADDRESS: 4207 W. 5655 SO-
KEARNS UT 84118

3.

NAME OF FIRST DEFENDANT Tooele Army DepotIS A CITIZEN OF USA SLCC UT

(City and State)

IS EMPLOYED AS USAat SLCC UT

(Position and Title if Any)

(Organization)

Was the defendant acting under the authority or color of state law at the time these claims occurred?

YES ☒ NO ☐ If your answer is "YES" briefly explain.

Color of law refers to the appearance
of legal authority, Or an apparently
Legal right that may not exist

4.

NAME OF SECOND DEFENDANT American Correctional Association

(If applicable)

IS A CITIZEN OF USA

(City and State)

IS EMPLOYED AS USA gov.at USA

(Position and Title if Any)

(Organization)

Was the defendant acting under the authority or color of state law at the time these claims occurred?

YES ☒ NO ☐ If your answer is "YES" briefly explain.

Same Above

5.

NAME OF THIRD DEFENDANT National Rehabilitation Association

(If applicable)

IS A CITIZEN OF USA gov

(City and State)

IS EMPLOYED AS USA gov.at USA

(Position and Title if Any)

(Organization)

Was the defendant acting under the authority or color of state law at the time these claims occurred?

YES ☒ NO ☐. If your answer is "YES" briefly explain.

SAME ABOVE

6. NAME OF FOURTH DEFENDANT (If applicable)

Utah state office Rehabilitation Administration, A.A. General service office | Alcoholics ABA American Bar Association

IS A CITIZEN OF

USA
(city and State)

IS EMPLOYED AS

USA govt

at USA

(Position and Title if Any) (Organization)

Was the defendant acting under the authority or color of state law at the time these claims occurred?

YES ☒ NO ☐. If your answer is "YES" briefly explain.

SAME ABOVE

(Use additional sheets of paper if necessary.)

B. NATURE OF CASE

1. Why are you bringing this case to court? Please explain the circumstances that led to the problem.

I'm the owner of all trademarks of United states of America federal and states entities global network Under sha 256 fingerprint hereditary blood secret seals USA, malicious and misconduct Hatch Act 5 USC 7323 (a) and 7324 (a) KKK Act 42 USC SECTION 1983

C. CAUSE OF ACTION

1. I allege that my constitutional rights, privileges or immunities have been violated and that the following facts form the basis for my allegations: (If necessary you may attach additional pages)

a. (1) Count I: Tooele Army Depot

- (2) Supporting Facts: (Describe exactly what each defendant did or did not do. State the facts clearly in your own words without citing legal authority or arguments.)

18 U.S.C. 1031 major fraud against the
United states of America, 18 U.S.C. section
1030 fraud of computers, 18 U.S.C. 2-239
pyramid scheme promotional scheme penal
code section 327, 18 U.S.C. Code 1348
securities and commodities fraud 18 U.S.C.
code section 2381 federal crime of treason
18 U.S.C. section 963, 21 U.S.C. section 963

b. (1) Count II: "RICO" Charges
Count II: American Correctional Association

- (2) ~~Supporting Facts:~~

National Rehabilitation
Association,
Utah state office Rehabilitation Administra
A.A. General service office Alcoholics,
ABA American Bar Association.

c. (1) Count III: _____

(2) Supporting Facts: _____

Same Above

D. INJURY

1. How have you been injured by the actions of the defendant(s)?

Mental Diseases
"WE US OUR"

E. PREVIOUS LAWSUITS AND ADMINISTRATIVE RELIEF

1. Have you filed other lawsuits in state or federal court that deal with the same facts that are involved in this action or otherwise relate to the conditions of your imprisonment?
YES ____ / NO _____. If your answer is "YES," describe each lawsuit. (If there is more than one lawsuit, describe additional lawsuits on additional separate pages, using the same outline.)

a. Parties to previous lawsuit:

Plaintiff(s): _____

Defendant(s): _____

b. Name of court and case or docket number: _____

c. Disposition (for example: Was the case dismissed? Was it appealed? Is it still pending?) _____

d. Issues raised: _____

e. When did you file the lawsuit? _____
Date Month Year

f. When was it (will it be) decided? _____

2. Have you previously sought informal or formal relief from the appropriate administrative officials regarding the acts complained of in Part C? YES ___ / NO _____. If your answer is "YES" briefly describe how relief was sought and the results. If your answer is "NO" explain why administrative relief was not sought.

F. REQUEST FOR RELIEF

1. I believe that I am entitled to the following relief:

Damages Unspecified
Alpha Code
CRPSTL

DECLARATION UNDER PENALTY OF PERJURY

The undersigned declares under penalty of perjury that he/she is the plaintiff in the above action, that he/she has read the above complaint, and that the information contained therein is true and correct. 28 U.S.C. §1746; 18 U.S.C §1621.

Executed at SLC on 08/21 2023
(Location) (Date)

ECRO
Signature